F. Human Pharmacokinetics and Bioavailability Summary, Continued

Table 5 Comparative Dissolution of Cenestin 1.25- and 2.5 mg Tablets

Cenestin™ 1.25 mg Tablets, Lot C-0015 (Biobatch)

	Percent Sodium Estrone Sulfate Released
Tablet	2 Hours 5 Hours 8 Hours 10 Hours
Mean Max	40.4 75.0 92.5 97.5
Min %RSD	일 등 하는 것으로 가는 것으로 되었다. 그는 사람들은 사람들은 사람들은 사람들은 사람들은 것으로 되었다. 그는 것으로 보는 것 되었다고 되었다고 되었다고 되었다고 되었다고 되었다고 되었다고 되었다고

Cenestin™ 2.5 mg Tablets, Lot S-0006

	Percent Sodium Estrone Sulfate Released
Tablet	2 Hours 5 Hours 8 Hours 10 Hours
Mean Max Min %RSD	33.6 70.9 90.2 95.9 5.4 2.1 1.6 1.7

Continued on next page

, ,

Attachment I

Cenestin™ Tablets Comparative Dissolution: F2 Calculations Mean Percent Sodium Estrone Sulfate Released				
2 Hour	5 Hour	8 Hour	F2	
40.3	74.6	90.7	N/A	
37.5	73.9	07.0		
43.5			79	
40.4			68	
33.6			92 67	
	2 Hour 40.3 37.5 43.5 40.4	Comparative Dissolu Mean Percent Sodium I 2 Hour 5 Hour 40.3 74.6 37.5 73.9 43.5 79.3 40.4 75.0	Comparative Dissolution: F2 Calculate Mean Percent Sodium Estrone Sulfate 2 Hour	

CLINICAL PHARMACOLOGY AND BIOPHARMACEUTICS REVIEW

NDA:

20992 (BB)

Compound:

Synthetic Conjugated Estrogens, A (Cenestin)

Sponsor:

Duramed Pharmaceuticals, Inc.

Type of Submission:

New Drug Product

Date of Submission:

December 8, 1998 (amendment)

Reviewer:

S.W. Johnny Lau, R.Ph., Ph.D.

Addendum to the January 27, 1999 Review

Background

On January 27, 1999, a review was performed for a submission dated December 8, 1998 that provided in vitro sodium equilin sulfate dissolution data for the 0.3, 0.625, and 0.9 mg strength Cenestin tablets. In the January 27, 1999 review, it is also noted that the Sponsor withdrew the 1.25 and 2.5 mg strength Cenestin tablets.

This document is an addendum to the January 27, 1999 review to address the following:

- 1. To better clarify a specific statement in the review's Recommendation section.
- 2. To revisit the dissolution specifications as stated in the reviews dated December 4, 1998 (sodium estrone sulfate) and January 27, 1999 (sodium equilin sulfate) for the 0.3, 0.625, and 0.9 mg strength Cenestin tablets, in light of the recent decision of not approving the 0.3 mg strength Cenestin tablet by the Division of Reproductive and Urologic Drug Products (DRUDP).

Clarification of the Recommendation Section of January 27, 1999 review:

Currently the January 27, 1999 review states the following:

"The Office of Clinical Pharmacology and Biopharmaceutics/Division of Pharmaceutical Evaluation II (OCPB/DPEII) has reviewed the 2 amendments of NDA 20992 dated December 8, 1998 and December 9, 1998. OCPB/DPEII is of the opinion that the sponsor has provided appropriate information to satisfy the BA and BE waiver requirements in 21 CFR 320.22 for Cenestin 0.3, 0.625, and 0.9 mg strength tablets."

For clarification, the above statements should be replaced with the following:

"The Office of Clinical Pharmacology and Biopharmaceutics/Division of Pharmaceutical Evaluation II (OCPB/DPEII) has reviewed the 2 amendments of NDA 20992 dated December 8, 1998 and December 9, 1998. OCPB/DPEII is of the opinion that the sponsor has provided appropriate information to satisfy the bioavailability requirements (21 CFR 320) for the 0.3, 0.625, and 0.9 mg strength Cenestin tablets."

Reassessment of the Dissolution Specifications Based on the In Vitro Dissolution Data for the 0.625 and 0.9 mg Strength Cenestin Tablets

Since only the 0.625 and 0.9 mg strength Cenestin[™] tablets will be approved by DRUDP, the following in vitro dissolution method and specifications are recommended, which are modified from the recommendations in the reviews dated December 4, 1998 and January 27, 1999.

Method:

The recommended in vitro dissolution method for both sodium estrone sulfate and sodium equilin sulfate is

Specifications:

The dissolution specifications for the 0.625 and 0.9 mg strength Cenestin tablets should be:

Time, hour	Sodium Estrone Sulfate, % dissolved	Sodium Equilin Sulfate, % dissolved
5		% dissolved
8		

Note: The above Method and Specifications have been conveyed to the Sponsor via a telephone conference on March 15, 1999.

S.W. Johnny Lau, R.Ph., Ph.D.

Ameeta Parekh, Ph.D. 3/23/99

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Final Draft
John Hunt

cc: NDA 20992, HFD-870 (M. Chen, J. Hunt, A. Parekh, S.W.J. Lau), HFD-580 (T. van der Vlugt, D. Moore), CDR (B. Murphy for Drugs)

CLINICAL PHARMACOLOGY AND BIOPHARMACEUTICS REVIEW

NDA:

20992 (BB)

Compound:

Synthetic Conjugated Estrogens.(Cenestin™)

Sponsor:

Duramed Pharmaceuticals, Inc.

Type of Submission:

New Drug Product

Date of Submissions:

December 8, 1998 (amendment)

Reviewer:

S.W. Johnny Lau, R.Ph., Ph.D.

Background:

The sponsor submitted this 505 (b)(2) NDA on March 27, 1998 for oral synthetic conjugated estrogens (Cenestin^{$^{\text{IM}}$}) to treat postmenopausal symptoms. Five Cenestin^{$^{\text{IM}}$} tablet strengths (0.3, 0.625, 0.9, 1.25, and 2.5 mg) were proposed for approval in this NDA. The sponsor claimed that Cenestin^{$^{\text{IM}}$} has 3 primary estrogenic substances (sodium estrone sulfate, sodium equilin sulfate, and sodium 17 α -dihydroequilin sulfate) and 6 minor estrogens. The sponsor submitted an amendment on December 8, 1998 to include the in vitro dissolution data and f_2 analysis for sodium equilin sulfate for Cenestin^{$^{\text{IM}}$} 0.3, 0.625, and 0.9 mg strength tablets. On December 9, 1998, the sponsor submitted another amendment to withdraw Cenestin^{$^{\text{IM}}$} 1.25 and 2.5 mg strength tablets for approval in NDA 20992.

Summary:

- Cenestin[™] 0.625 and 0.3 mg strength tablets were studied in the pivotal clinical study (2x0.625, 1x0.625, and 1x0.3 mg strength tablets).
- 2. The sponsor requested a bioavailability (BA) and bioequivalence (BE) study waiver for Cenestin[™] 0.3, 0.9, and 2.5 mg strength tablets.
- 3. The formulation composition of Cenestin[™] 0.3, 0.625, and 0.9 mg strength tablets are proportionally similar. The formulation composition of Cenestin[™] 1.25 and 2.5 mg strength tablets are also proportionally similar but different from that of Cenestin[™] 0.3, 0.625, and 0.9 mg strength tablets.
- 4. The to-be-marketed Cenestin[™] 0.3 mg strength tablet is green-colored. Whereas the clinically-tested 0.3 mg strength tablet is red-colored. This color change is to maintain blinding for the clinically-tested 0.625 mg strength tablet, which is red-colored. The green- and red- colored 0.3 mg strength tablets are the same in formulation composition and processing.
- 5. Only in vitro dissolution data for sodium estrone sulfate for all 5 strength tablets were provided in the original NDA.

- 6. During a telephone conference on December 4, 1998, the sponsor was requested to provide the in vitro comparative dissolution data for sodium equilin sulfate for the to-be-marketed Cenestin[™] 0.3, 0.625, and 0.9 mg strength tablets. In support of the color change for the to-be-marketed 0.3 mg strength tablet, in vitro comparative dissolution data for sodium equilin sulfate for the clinically-tested (red-colored) and to-be-marketed (green-colored) 0.3 mg strength tablets are also needed.
- 7. In the same telephone conference, the sponsor was notified that the 1.25 and 2.5 mg strength tablets do not meet the BA and BE waiver requirements in 21 CFR 320.22. This decision is based on that the proposed to-be-marketed 1.25 and 2.5 mg strength tablets are not compositionally similar to the to-be-marketed 0.3, 0.625, 0.9 mg strength tablets. Moreover, Cenestin 1.25 and 2.5 mg strength tablets were not clinically tested.
- 8. The f₂ for clinically-tested lots of 0.625 and 0.3 mg strength tablets to the to-be-marketed lot of 0.625 mg strength tablet as well as the f₂ for the to-be-marketed lots of 0.3 and 0.9 mg strength tablets to the to-be-marketed lot of 0.625 mg strength tablet were all within 57.4 and 96.1. The f₂ for the clinically-tested lot of 0.3 mg strength tablet to the to-be-marketed lot of 0.3 mg strength tablet was 69.6. These data demonstrated similar sodium equilin sulfate dissolution profiles between the to-be-marketed 0.3, 0.625, and 0.9 mg strength tablets. (See Attachment for sodium equilin sulfate dissolution data.)

Cenestin [™] Strength Tablets	f_2	f ₂
to-be-marketed 0.625 mg	reference	+Z
clinically-tested 0.625 mg	70.9	
to-be-marketed 0.3 mg (green)	57.4	reference
clinically-tested 0.3 mg (red)	72.5	69.6
to-be-marketed 0.9 mg	96.1	09.0
	7 7.1	

- 9. The sponsor proposed that the dissolution requirements for sodium estrone sulfate and sodium equilin sulfate to be the same. Therefore, the proposed in vitro dissolution method for sodium equilin sulfate is USP Method I, 50 rpm, 900 ml deaerated purified water at 37+/-0.5°C.
- 10. Per the original NDA submission, the proposed sodium estrone sulfate dissolution limit at 5 hours is and not as stated in the December 8, 1998 amendment.
- 11. Per the December 8, 1998 amendment, the proposed dissolution limits for sodium equilin sulfate follow:

Time (hours)	Cenestin [™] 0.3, 0.625, 0.9 mg Strength Tablets
2	- mg ottength radicts
5	
8	

Recommendations:

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The Office of Clinical Pharmacology and Biopharmaceutics/Division of Pharmaceutical Evaluation II (OCPB/DPEII) has reviewed the 2 amendments of NDA 20992 dated December 8, 1998 and December 9, 1998. OCPB/DPEII is of the opinion that the sponsor has provided appropriate information to satisfy the BA and BE waiver requirements in 21 CFR 320.22 for Cenestin™ 0.3, 0.625, and 0.9 mg strength tablets. The sponsor's proposed in vitro dissolution method is acceptable. However, the in vitro dissolution specifications for sodium equilin sulfate for Cenestin™ 0.3, 0.625, and 0.9 mg strength tablets should be and not less than at 2, 5, and 8 hours, respectively.

S.W. Johnny Lau, R.Ph., Ph.D.
Office of Clinical Pharmacology and Biopharmaceutics
Division of Pharmaceutical Evaluation II

FT signed by Ameeta Parekh, Ph.D., Team Leader ___

1/27/99

cc:

NDA 20992, HFD-870 (M. Chen, A. Parekh, S.W.J. Lau), HFD-580 (T. van der Vlugt, D. Moore), CDR (B. Murphy for Drugs)

Individual Dissolution Data for Equilin

0.6	525 mg ND	T#C-0005 A bioavaila	ibility lot
SAMPL 1	E 2HR	5HR	8HR
2			
3			
4 5			
6			
7 8			
9			
10			
11 12			
Mean % SD %	41.2	77.4	93.3
High %	5.9 44.6	2.6 80.0	1.6
Low %	37.2	73.9	95.5 91.0
0.60	LOT#	94850	
0.623 SAMPLE	mg pivota 2HR	l clinical tr 5HR	
			8HR
2 3			
4			
5			
6 7			
8			
9 10			
11			
12			
Mean %	35.6	74.4	94.0
SD % High %	7.5	3.4	2.4
Low %	40.4 31.5	78.2 70.6	97.5
			90.2

Individual Dissolution Data for Equilin

0		X-0328	
SAMPLE	2HR	submission 5HR	lot 8HR
1 2 3 4 5 6 7 8 9 10 11			
Mean % SD % High % Low %	34.0 9.2 40.2 28.4	68.5 3.6 72.0 64.4	89.1 2.9 92.3 83.4
0.3 r SAMPLE 1 2 3 4 5 6 7 8 9 10 11		C-0034 clinical trial 5HR	lot 8HR
Mean % SD % High %	36.6 11.5 46.2	73.8 4.4 78.7	92.5 4.1 100.4

66.8

32.0

Low %

86.3

Individual Dissolution Data for Equilin

0	LOT# 0.9 mg NDA	fX-0335	- 1-+
SAMPLE	2HR	5HR	II IOL 8HR
1			¥ = 1
2 3			
4			
5			
6 7			
, 8			
9			
10			
11			
12			
Mean %	42.1	76.9	92.8
SD %	4.1	2.4	92.0 2
High %	44.0	79.8	97.0
Low %	38.7	74.1	90.4

CALCULATION OF f 2 VALUES (Similarity Factor)

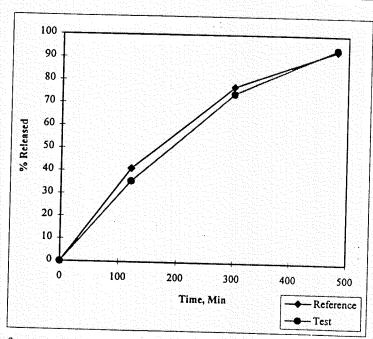
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Time	R _i	I,	R _i - T	; (R ₁ -T,
į :120 ;	ij::j4][(2)	35.6	5.60	31.36
-300	1. 77.4	74!4	3.00	9.00
480:	93.3	.:::9410	⊈' 0.70 ∰'	0.49

$$f_1 = [(\text{sum} \mid R_t - T_t \mid) / (\text{sum} R_t)] \times 100$$

 $f_2 = 50 \times \log\{[1 + (1/n) \text{sum} (R_t - T_t)^2]^{-0.5} \times 100\}$

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				12.	1
· T	2 =	100	70.	Q:	1
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Reference:

CALCULATION OF f 2 VALUES (Similarity Factor)

Reference C-0005 Product: Conjugated Estrogens Tablet, USP

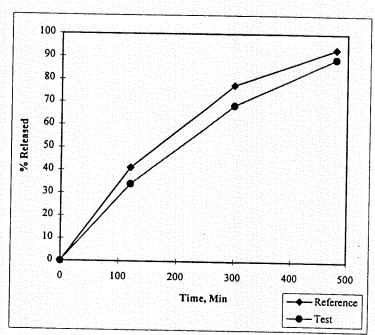
Test:	X-0328 C	omponent:	Equilin	
<u>Time</u>	<u>R</u>	T,	R _t - T _t	$(R_i - T_i)^i$
.ӴI20##	412	#34/0 TO	7.20	51.84
1,000	77.4	THE PARTY OF THE PARTY OF THE PARTY OF	8.90	79.21
2.480∌ .	93:3	\$ 8 9.1-5	4.20	17.64
	,			
Sum	211.90	191.60	20.30	148.69

$$f_1 = [(\text{sum} \mid R_t - T_t \mid) / (\text{sum } R_t)] \times 100$$

 $f_2 = 50 \times \log\{[1 + (1/n) \text{ sum } (R_t - T_t)^2]^{-0.5} \times 100\}$

3

f	1 —	0.6	
. 7	1	9.6	. 1
100			. 1
f	2 =	57.4	.
-		97.7	.



Reference:

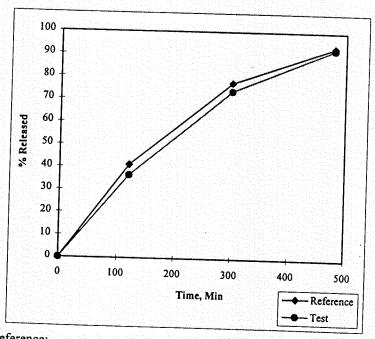
n

CALCULATION OF f 2 VALUES (Similarity Factor)

Reference C-0005 Product: Conjugated Estrogens Tablet, USP

Test: G=0034 Component: Equilin				
<u>Time</u>	R _t	T_{i}	$R_i - T_i$	$(R_i - T_i)^2$
120	462	36.6-	4.60	21.16
∄300 ∋.	77.4	And the section parties in the section of	3.60	12.96
480	93.3	·Ç:92:5	0.80	0.64
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		Situation and the property of the party of t		
Sum	211.90	202.90	9.00	34.76

$f_i = [(sum R_t - T_t) / (sum R_t)] \times 100$	fl = 42	I
$f_2 = 50 \times \log\{[1 + (1/n) \text{ sum } (R_t - T_t)^2]^{-0.5} \times 100\}$	f1 = 4.2 f2 = 72.5	



Reference:

n

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CALCULATION OF f 2 VALUES (Similarity Factor)

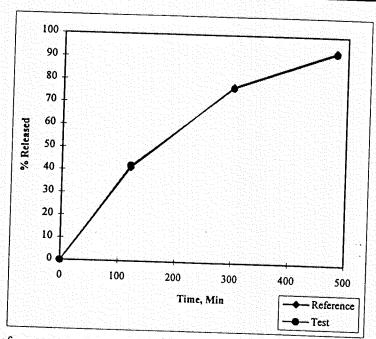
D-C	And the Control of th
Kererence	G-0005 Product: Conjugated Estrogens Tablet, USP
	- Louis Land Conjugated Estrogens Tablet 11SP
Test:	
I COL.	X-0335 Component: Fauilin

Time	X=0335 = (R	Componen T	t: Equilin R _t - T _t	(R ₁ - T ₂) ²
				1727-11
::120.	. jal2 :	42,1.	0.90	0.81
300 480	77.4	76.9	0.50	0.25
**************************************		92.8	0.50	0.25
4.47.				
		a vec		
Sum	211.90	211.80	1.90	1.31
n	3			

$$f_1 = [(\text{sum} \mid R_t - T_t \mid) / (\text{sum} R_t)] \times 100$$

 $f_2 = 50 \times \log\{[1 + (1/n) \text{sum} (R_t - T_t)^2]^{-0.5} \times 100\}$

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Reference:

CALCULATION OF f 2 VALUES (Similarity Factor)

Reference X-0328 Product: Conjugated Estrogens Tablet, USP

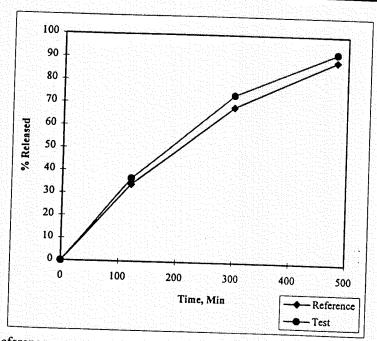
Test:	C=00345,	Component:	Equilin	
<u>Time</u>	R,	I,	$R_i - T_i$	(R, - T,)
ii 120.	≓≟34:0≕≀	≟:36.6	2.60	6.76
300	(68.5.	TO ROLL THE TANK THE PARTY OF T	5.30	28.09
*/480***	89:1	92:5	3.40	11.56
Sum	191.60	202.90	11.30	46.41

$$f_1 = [(\text{sum} \mid R_t - T_t \mid) / (\text{sum} R_t)] \times 100$$

 $f_2 = 50 \times \log\{[1 + (1/n) \text{sum} (R_t - T_t)^2]^{-0.5} \times 100\}$

3

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Reference:

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CLINICAL PHARMACOLOGY AND BIOPHARMACEUTICS REVIEW

IND:

- (N-009 PN))

Compound:

Synthetic conjugated estrogens (Cenestin™)

Sponsor:

Duramed Pharmaceuticlas, Inc.

Type of Submission:

Phase II clinical study protocol: bioequivalence of 2x0.625 and

1x1.25 mg synthetic conjugated estrogens tablets

Date of Submission:

February 8, 1999

Reviewer:

S.W. Johnny Lau, R.Ph., Ph.D.

Background:

Conjugated estrogens are used to treat vasomotor symptoms for menopausal women. The Sponsor submitted NDA 20992 for Cenestin^{$^{\text{M}}$} 0.3, 0.625, 0.9, 1.25, and 2.5 mg tablets. The original formulation of 1.25 and 2.5 mg tablets are different from that of the 0.3, 0.625, and 0.9 mg tablets. The Sponsor has reformulated the 1.25 and 2.5 mg tablets to be similar to the 0.3, 0.625, and 0.9 mg tablets. Thus, this IND includes a protocol to evaluate the bioequivalence of 1 Cenestin^{$^{\text{M}}$} 1.25 mg tablet versus 2 Cenestin^{$^{\text{M}}$} 0.625 mg tablets.

PROTOCOL SUMMARY

Protocol Number: DPI 99-01

Study Title:

Comparative, randomized, single-dose, 2-way crossover bioequivalence study of one Duramed (Cenestin[™]) 1.25 mg tablet versus two Duramed (Cenestin[™]) 0.625 mg tablets in healthy, postmenopausal female adults under fasting conditions.

Objectives:

To evaluate the single dose bioequivalence of 1 Cenestin[™] 1.25 mg tablet versus 2 Cenestin[™] 0.625 mg tablets under fasting conditions.

Study Design:

This is an open-label, randomized, 2-period, single dose, crossover study in 36 (18-65 years) postmenopausal or oophorectomized female. Each randomized subject will receive either 2 Cenestin™ 0.65 mg tablets or 1 Cenestin™ 1.25 mg tablet on the first treatment period. On the second treatment period, each subject will receive the treatment she did not receive previously. The washout period between the 2 treatments will be 14 days.

Blood Sampling and Analysis:

Serial blood samples will be collected from each subject at -0, 1.5, 3, 4.5, 6, 7.5, 9, 10.5, 12, 14, 16, 24, 32, 40, 48, 60, and 72 hours postdose. Plasma conjugated and unconjugated estrone, equilin, and estradiol concentrations will be determined.

Pharmacokinetic Analysis:

 C_{max} , t_{max} , $AUC_{(0\rightarrow 1)}$, $AUC_{(0\rightarrow 72)}$, $AUC_{(0\rightarrow inf)}$, k_{el} , and $t_{1/2}$ will be estimated via standard methods.

Statistical Analysis:

ANOVA will be performed on the log-transformed $AUC_{(0\to t)}$, $AUC_{(0\to inf)}$, and C_{max} . The ANOVA model will include sequence, subjects nested within sequence, period and formulation as factors. The significance of the sequence effect will be tested via the subjects nested within sequence as the error term. ANOVA will also be performed via the average baseline value in each period as the covariate.

Comments:

- 1. Assessment of bioequivalence should be on the same pharmacokinetic parameters as those in the NDA 20992, namely, AUC_(0→12), AUC_(0→inf), and C_{max} of unconjugated and total estrone and equilin€.
- 2. Formulation ingredients of the Cenestin [™] tablets should be provided.
- 3. Complete bioanalytical report to quantitate conjugated and unconjugated estrone, equilin, and estradiol should include specificity, lower limit of quantitation, inter- and intra- day assay precision, accuracy, linearity, and validation. The bioanalytical report should be included in the final study report.

Recommendations:

The Office of Clinical Pharmacology and Biopharmaceutics/Division of Pharmaceutical Evaluation II (OCPB/DPEII) has reviewed IND dated February 5, 1999. Comments 1 to 3 should be conveyed to the Sponsor.

S.W. Johnny Lau, R.Ph., Ph.D.		
Office of Clinical Pharmacology and Biopharmaceutics Division of Pharmaceutical Evaluation II		
FT signed by Ameeta Parekh, Ph.D., Team Leade.	31 9 199	
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IND 53731, HFD-870 (M. Chen, A. Parekh, S.W.J. Lau), HFD-580 (T. van der Vlugt, D. Moore), CDR (B. Murphy for Drugs)